Substitute for Form PTO-876								ademark Office; U.S. DEPARTMENT OF COMINERC Mineston unless it displays a velid OMB control number Application or Docket Number 10 6 7 2 3 5					
A	PPLICATION (Col	AS FILED		mn'2)	SM	KLL E	HTITY	(DR·	TO	HER THAN	·	
FOR	. NVMB	ER FILED	NUMBER	EXTRA				7	Г	0140	ACC CIAILLY	<u> </u>	•
IASIC FEE 17 QFR 1.16(a), (b), or (c	,				RATE	(B)	FEE (\$	니	L	RATE () FE	≘(\$)	•
EARCH FEE 17 OFR 1.16(k), (1), or (m		,			 				-	!	<u> </u>		
XAMINATION FEE 7 OFR 1.16(0), (p), or (0		,	 			-			-	·.			
OTAL CLAIMS 7 OFR 1.16(I))		minus 20 ×	1.					_	-	· .			•
DEPENDENT GLAIN 7 CFR 1.16(h))	is · · · · · ·	minus 3 =			×	=		0			ď		
, , , , , , , , , , , , , , , , , , , ,	If the spec	figation and	drawings exoc	001 100	×	-] `	×		e		* 19
PPLICATION SIZE E COFR 1.16(s))	is \$250 (\$1	aper, the ap 25 for small 50 sheets or	pplication size (entity) for each fraction therecand 37 CFR 1.	lèe due h						-			
ILTIPLE DEPENDEN					<u> </u>	_		-	-			[·	
the difference in colu				——————————————————————————————————————	L	+		-			_		
•		•			TOTAL	L		J .	•	TOTAL			·
APPLIC	AA BA NOITA	1ENDED -	PARTII								: •		
· · · · · · · · · · · · · · · · · · ·	Column 1)	(0	olumn 2) (Co	olumn 3)	SMAL	I EAN	ri n s/	OF	\	OTHE	R THAN	1.	
	CLAIMS EMAINING	HIG	SHEST MBER PR	ESENT			HIY	7	<u></u>		ENTITY		
A	AFTER MENDMENT	PRE	VIOUSLY E	XTRA	RATE (\$)	1.1	ADDI- FIONAL	 	F	RATE (\$)	ADDI- TIONA		
Total (27 OFR 1.16(1))	31	Umarca 44	31 =	7	× 25 =		EE (\$)		-		FEE		•
Independent (PT OFFR 1.16(h))	6 .M	inus ***	6 =			-	`	OR		<u> 50 -</u>	1->		
Application Size Fee	(37 CFR 1.16(s))		<u>.w</u>	—— -	×/00 =		\rightarrow	OR	×a	60 .=			-,
FIRST PRESENTATION	OF MULTIPLE DE	PENDENT OLA	M (37 OFR 1.16)		180		7 A			60	7 10 7	<u> </u>	,
•		·			TOTAL	┥—	-	OR .	TOT		-	_	:
(0	lumn 1)				ADD'L FEE			OR		YL FEE].	
7-7	LAIMS .		lumn 2) (Colu IEST	umn 3)	····	·							
	MAINING FTER		BER PRE	SENT .	RATE (\$)		-IOO.		R.A	TE (\$)	ADDI-		
Total	MDMENT Min	PAID	FOR				ONAL E(\$)			*	TIONAL FEE (\$)		
37 OFR 1.16(I))	Min			×	(E			O.R	X		1 = 19/		
ndependent 57 OFR 1:18(h))		us .	=	×	. =			OR	···				٠
pplication Size Fee (UK	^ ;			- -	
IRST PRESENTATION	OF MULTIPLE DEPE	NDENT CLAIM	(37 OFR 1.16(J))			"		OR .					
					OTAL				TOTA			-	
the entry in column t	Is less than the e	ntry in colum	n 2. write "0" in ~		DD/L FEE			OR	ADDI		· .	1	
he "Highest Number	Proviously Paid F	or IN THIS S	SPACE Is less th	an 20, enter "2	20.*.					•		7	
e "Highest Number F	roulously fluid F	ol livilinio o	LYCE IS 1688 (UE	an 3, enter "3".		(he enn	ropdote :		dan -			1 .	
processed on applica	los Cardinal IV		is another total 13	o iedaliea lo o	Diain or rela	in a h	anofil his	han mad	15 1 .	1 1 1 1	e (and by th]. e	:
ramering, preparing,	in gnillimans uni	e completed a	application form t	lo (he USPTO:	Time will va	ry den	ending un	nateonic	lake	12 (minutes	io complete	John million	
mark Office, U.S. De SEND TO: Com	·····································	ചെലപ്പട്ടെയിൽവ				,	- · · - · · · · · · · · · · · · · · · ·		THE PROPERTY.	MITHER A	av comment	s .	

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.